



EDMUND G. BROWN JR.
GOVERNOR

MATTHEW RODRIGUEZ
SECRETARY FOR
ENVIRONMENTAL PROTECTION

State Water Resources Control Board

Division of Drinking Water

June 15, 2018
Certified Mail No.
7012 3460 0003 1112 9585

Terhel Farms Trailer Park 01
P.O. Box 790
Williams, CA 95987

Attention: Cindy Holland

Subject: Terhel Farms Trailer Park 01, Public Water System No. 0600027 - Citation No. 21-18C-020 for failure to submit 2016 and 2017 Electronic Annual Reports to the State Water Resources Control Board, and failure to address water system deficiencies.

Enclosed is Citation No. 21-18C-020, issued to the Terhel Farms Trailer Park 01 (hereinafter "System"), public water system. This citation is being issued as a result of the System's failure to submit the 2016 and 2017 electronic Annual Reports, and for failure to address water system deficiencies by their respective due dates. Please take special note of the citation directives herein, as they contain legally enforceable deadlines.

Be advised that this Citation imposes a civil penalty of \$500.00.

Note that Section 116577 of the California Safe Drinking Water Act provides for the Division to be reimbursed by the Water System for costs incurred for preparing and issuing a citation. In accordance with Section 116577, the Water System will be billed for the preparation and issuance of this citation.

Any person who is aggrieved by an order or decision issued by the Division, may file a petition with the State Water Board for reconsideration of the order or decision. Petitions must be received by the State Board within 30 days of the issuance of the order or decision. The date of issuance is the date when the Division mails a copy of the order or decision. If the 30th day falls on a Saturday, Sunday, or state holiday, the petition is due the following business day. Petitions must be received by 5:00 p.m. See attached Applicable Authorities for relevant statutory provisions for filing a petition.

For more Information regarding filing petitions, visit the following website:
http://www.waterboards.ca.gov/drinking_water/programs/petitions/index.shtml

Cindy Holland
Terhel Farms Trailer Park 01

- 2 -

June 15, 2018
PWS No. 0600027

If you have any questions regarding this matter, please contact Paul Rowe of my staff at (530) 224-4866 or me at (530) 224-4861.

A handwritten signature in blue ink, appearing to read "R. Crenshaw".

Reese B. Crenshaw, P.E.
District Engineer- Valley District
Drinking Water Field Operations Branch

Enclosures

cc: Colusa County Environmental Health

1 **Citation No. 21-18C-020**

2
3 **STATE OF CALIFORNIA**
4 **STATE WATER RESOURCES CONTROL BOARD**
5 **DIVISION OF DRINKING WATER**
6

7 **Public Water System:** Terhel Farms Trailer Park 01

8 **Water System No:** 0600027
9

10 **To:** Terhel Farms Trailer Park 01

11 Cindy Holland

12 P.O. Box 790

13 Williams, CA 95987
14

15 **Issued:** June 15, 2018

16 VIA CERTIFIED MAIL

17 7012 3460 0003 1112 9585
18
19

20 **CITATION FOR VIOLATION OF**
21 **CALIFORNIA HEALTH AND SAFETY CODE**
22 **DIVISION 104, PART 12, CHAPTER 4, ARTICLE 7, SECTION 116530 AND**
23 **CALIFORNIA CODE OF REGULATIONS**
24 **SECTIONS 64422, 64560, AND 64561**
25 **FAILURE TO SUBMIT ANNUAL REPORTS AND**
26 **FAILURE TO ADDRESS WATER SYSTEM DEFICIENCIES**
27

1 The California Health and Safety Code (hereinafter "CHSC"), Section 116650
2 authorizes the State Water Resources Control Board (hereinafter "State Water
3 Board"), to issue a citation to a public water system when the State Water Board
4 determines that the public water system has violated or is violating the California Safe
5 Drinking Water Act (hereinafter "California SDWA"), (CHSC, Division 104, Part 12,
6 Chapter 4, commencing with Section 116270), or any regulation, standard, permit, or
7 order issued or adopted thereunder.

8
9 The State Water Board, acting by and through its Division of Drinking Water
10 (hereinafter "Division"), and the Deputy Director for the Division, hereby issues
11 Citation No. 21-18C-020 (hereinafter "Citation"), pursuant to Section 116650 of the
12 CHSC to the Terhel Farms Trailer Park 01 for violation of CHSC, Division 104, Part
13 12, Chapter 4, Article 7, Sections 116530 and 116460, and for violation of the
14 California Code of Regulations (CCR), Sections 64422, 64560, and 64561.

15
16 **APPLICABLE AUTHORITIES**

17 See applicable statutes and regulations in **Attachment 'A'**.

18
19 **STATEMENT OF FACTS**

20 The Terhel Farms Trailer Park 01 (hereinafter "System") is classified as a transient
21 public water system in Colusa County, serving approximately 25 people per day.

22
23 In accordance with Section 116530 of the CHSC, the System is required to submit a
24 technical report to the State Water Board when requested. The State Water Board
25 has established a requirement for public water systems to submit an annual technical
26 report which specifies contact and operational information for the prior calendar year.
27 On May 1, 2018, the State Water Board sent an email notification to remind all public

1 water systems that the Calendar Year 2017 Annual Report submittal deadline would
2 be **June 1, 2018**. This notice also included instructions on how to submit the report
3 electronically to the State Water Board. As of the date of this citation, the System has
4 not submitted the 2017 Annual Report to the Division. In addition, the System was
5 issued Citation No. 21-17C-040 on November 14, 2017 for not submitting the 2016
6 Annual Report by the due date of **April 30, 2017**.

7
8 Furthermore, as a result of a water system inspection of the System on September 6,
9 2017, the following deficiencies were observed during the inspection:

- 10 1. The Emergency Notification Plan (ENP) needs to be updated and a copy
11 submitted to the Division. (CHSC, Section 116460)
- 12 2. The Bacteriological Sample Siting Plan (BSSP) needs to be updated and a
13 copy submitted to the Division. (CCR, Section 64422)
- 14 3. The electronic Annual Report needs to be completed on-line. (CHSC, Section
15 116530)
- 16 4. The well head top seal needs to have a gooseneck shaped casing vent
17 installed that is downward turned and screened. (CCR, Section 64560)
- 18 5. A totalizing flow meter needs to be installed. The meter reading to be recorded
19 monthly. (CCR, Section 64561)
- 20 6. The electrical tape wrapping around the well casing needs to be removed and
21 photos showing 360 degrees around the well head need to be submitted to the
22 Division for evaluation. A review of previous inspection photographs reveal
23 that the well casing may be rusted through.

24
25 The above deficiencies specified in the inspection report were to be addressed by the
26 System by **October 15, 2017**. As a result of missing these deadlines, between
27 January and March of 2018, the Division made multiple attempts to contact the
28 System as a reminder of the outstanding deficiencies and to offer assistance with

1 completing the annual reports. As of the date of this Citation, the System has failed to
2 address these deficiencies and accept the assistance.

3 4 **DETERMINATION**

5 The Division has determined that the System violated CHSC, Division 104, Part 12,
6 Chapter 4, Article 7, Section 116530, in that the System has failed to submit an
7 electronic Annual Report for Calendar years 2016 and 2017. Furthermore, the
8 Division has determined that the System violated Section 116460 of the California
9 Health and Safety Code (CHSC) and Sections 64422, 64560, and 64561 of the CCR,
10 in that it has failed to address the inspection deficiencies identified above.

11 12 **ADMINISTRATIVE PENALTY**

13 Sections 116650(d) and 116650(e) of the California Health and Safety Code allow for
14 the assessment of a penalty for failure to comply with requirements of the California
15 Safe Drinking Water Act.

16
17 For failure to submit the 2016 and 2017 Annual Reports, and for failure to address
18 water system deficiencies by the due dates specified herein, the Division hereby
19 assesses the Water System a penalty of **\$500.00**.

20 21 **DIRECTIVES**

22 The System is hereby directed to take the following action:

- 23 1. **Submit to the Board by July 16, 2018, a check for the penalty of \$500.00.**

24 The citation number (21-18C-020) shall be written on the check. The check shall
25 be made payable to the **California Division of Drinking Water – Safe Drinking**
26 **Water Account** and mailed to the State Water Resources Control Board along
27 with **Attachment 'B'** entitled "Notice of Citation Issuance."

2. Complete and return **Attachment 'C'** entitled "Compliance Certification" to the address listed below by **August 16, 2018**.
3. On or before **July 1, 2018**, complete and return the attached **2016 Annual Report (Attachment 'D')** to the address listed below.
4. On or before **July 1, 2018**, complete the **2017 Annual Report** and submit it to the State Water Board at <http://drinc.ca.gov>.
5. On or before **July 1, 2018**, address all water system deficiencies specified in the Statement of Facts above, and submit to the Division photographic proof of all physical repairs.
6. The System shall provide public notification of this citation by posting in conspicuous places at the System's property. **Attachment 'E'** must be used unless otherwise approved in writing. The posting shall last for one week minimum and must commence by no later than **July 1, 2018**.
7. Complete and return **Attachment 'F'** (Certification of Public Notification), by no later than **July 15, 2018**.

With the exception of Directive 1, all documents required by this Citation to be submitted to the Division shall be submitted to the following address:

Reese B. Crenshaw, P. E.
Valley District Engineer
Drinking Water Field Operations



1 Division of Drinking Water
2 State Water Resources Control Board
3 364 Knollcrest Drive, Suite 101
4 Redding, CA 96002
5 (530) 224-4800
6

7 The State Water Board reserves the right to make such modifications to this Citation
8 as it may deem necessary to protect public health and safety. Such modifications may
9 be issued as amendments to this Citation, and shall be deemed effective upon
10 issuance.
11

12 Nothing in this Citation relieves the System of its obligation to meet the requirements
13 of the California SDWA (CHSC, Division 104, Part 12, Chapter 4, commencing with
14 Section 116270), or of any regulation, standard, permit or order issued or adopted
15 thereunder.
16

17 **PARTIES BOUND**

18 This Citation shall apply to and be binding upon the System, its owners,
19 shareholders, officers, directors, agents, employees, contractors, successors, and
20 assignees.
21

22 **SEVERABILITY**

23 The directives of this Citation are severable, and the System shall comply with each
24 and every provision thereof, notwithstanding the effectiveness of any other provision.
25
26

FURTHER ENFORCEMENT ACTION

The California SDWA authorizes the State Water Board to: issue a citation with assessment of administrative penalties or an order to a public water system for violation or continued violation of the requirements of the California SDWA or any regulation, permit, standard, citation or order issued or adopted thereunder including, but not limited to, failure to correct a violation identified in a citation or compliance order. The California SDWA also authorizes the State Water Board to take action to suspend or revoke a permit that has been issued to a public water system if the system has violated applicable law or regulations or has failed to comply with an order of the State Water Board; and to petition the superior court to take various enforcement measures against a public water system that has failed to comply with an order of the State Water Board. The State Water Board does not waive any further enforcement action by issuance of this Citation.

6/15/2018

Date



Richard L. Hinrichs

Richard L. Hinrichs, P.E., Chief

Northern California Section

Division of Drinking Water

State Water Resources Control Board



1 Attachments:

2 Attachment A - Applicable Authorities

3 Attachment B - Notice of Citation Issuance

4 Attachment C - Compliance Certification

5 Attachment D - 2016 electronic Annual Report

6 Attachment E – Public Notification of Citation

7 Attachment F – Certification of Public Notification

APPLICABLE AUTHORITIES

Section 116650 of the CHSC states in relevant part:

- (a) If the Department determines that a public water system is in violation of this chapter or any regulation, permit, standard, citation, or order issued or adopted thereunder, the department may issue a citation to the public water system. The citation shall be served upon the public water system personally or by certified mail. Service shall be deemed effective as of the date of personal service or the date of receipt of the certified mail. If a person to whom a citation is directed refuses to accept delivery of the certified mail, the date of service shall be deemed to be the date of mailing.*
- (b) Each citation shall be in writing and shall describe the nature of the violation or violations, including a reference to the statutory provision, standard, order, citation, permit, or regulation alleged to have been violated.*
- (c) A citation may specify a date for elimination or correction of the condition constituting the violation.*
- (d) A citation may include the assessment of a penalty as specified in subdivision (e).*
- (e) The department may assess a penalty in an amount not to exceed one thousand dollars (\$1,000) per day for each day that a violation occurred, and for each day that a violation continues to occur. A separate penalty may be assessed for each violation.*

Section 116701 of the CHSC states in relevant part:**Petitions to Orders and Decisions**

- (a) Within 30 days of issuance of an order or decision issued by the deputy director under Article 8 (commencing with Section 116625) or Article 9 (commencing with Section 116650), an aggrieved person may petition the state board for reconsideration. Where the order or decision of the deputy director is issued after a hearing under Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the Government Code, this section shall apply instead of Section 11521 of the Government Code.*
- (b) The petition shall include the name and address of the petitioner, a copy of the order or decision for which the petitioner seeks reconsideration, identification of the reason the petitioner alleges the issuance of the order was inappropriate or improper, the specific action the petitioner requests, and other information as the state board may prescribe. The petition shall be accompanied by a statement of points and authorities of the legal issues raised by the petition.*
- (c) The evidence before the state board shall consist of the record before the deputy director and any other relevant evidence that, in the judgment of the state board, should be considered to implement the policies of this chapter. The state board may, in its discretion, hold a hearing for receipt of additional evidence.*
- (d) The state board may refuse to reconsider the order or decision if the petition fails to raise substantial issues that are appropriate for review, may deny the petition upon a determination that the issuance of the order or decision was appropriate and proper, may set aside or modify the order or decision, or take other appropriate action. The state board's action pursuant to this subdivision shall constitute the state board's completion of its reconsideration.*

- (e) The state board, upon notice and hearing, if a hearing is held, may stay in whole or in part the effect of the order or decision of the deputy director.*
- (f) If an order of the deputy director is subject to reconsideration under this section, the filing of a petition for reconsideration is an administrative remedy that must be exhausted before filing a petition for writ of mandate under Section 116625 or 116700.*

Section 116530 of the CHSC states in relevant part:

A public water system shall submit a technical report to the department as part of the permit application or when otherwise required by the department. This report may include, but not be limited to, detailed plans and specifications, water quality information, and physical descriptions of the existing or proposed system, and financial assurance information.

Section 116460 of the CHSC states in relevant part:

No person shall operate a public water system without an emergency notification plan that has been submitted to and approved by the department. The emergency notification plan shall provide for immediate notice to the customers of the public water system of any significant rise in the bacterial count of water or other failure to comply with any primary drinking water standard that represents an imminent danger to the health of the water users.

Section 64422 of the CCR states in relevant part:

- (a) By September 1, 1992 each water supplier shall develop and submit to the State Board a siting plan for the routine collection of samples for total coliform analysis, subject to the following:*
- (1) The sample sites chosen shall be representative of water throughout the distribution system including all pressure zones, and areas supplied by each water source and distribution reservoir.*
 - (2) The water supplier may rotate sampling among the sample sites if the total number of sites needed to comply with (a)(1) above exceeds the number of samples required according to Table 64423-A. The rotation plan shall be described in the sample siting plan.*
- (b) If personnel other than certified operators will be performing field tests and/or collecting samples, the sample siting plan shall include a declaration that such personnel have been trained, pursuant to Section 64415 (b).*
- (c) The supplier shall submit an updated plan to the State Board at least once every ten years and at any time the plan no longer ensures representative monitoring of the system.*

Section 64560(c) of the CCR states in relevant part:

- (c) Each new public water supply well shall:*
- (1) As a minimum, be constructed in accordance with the community water system well requirements in California Department of Water Resources Bulletins 74-81 and 74-90, which are hereby incorporated by reference;*

Section 64561 of the CCR states in relevant part:

Each water system shall:

- (a) Except for inactive sources, install a flow meter at a location between each water source and the entry point to the distribution system;*
- (b) Meter the quantity of water flow from each source, and record the total monthly production each month.*

**STATE OF CALIFORNIA
Division of Drinking Water
State Water Resources Control Board**

Notice of Citation Issuance

System Name: Terhel Farms Trailer Park 01

System Number: 0600027

Background Statement

During the month of June 2018, the Division of Drinking Water issued Citation Number 21-18C-020 to the Terhel Farms Trailer Park 01. The citation carried an administrative penalty in the amount of \$500.00

Method of Payment

A check for the total amount of the administrative penalty and a copy of this form shall be submitted to the Division by **July 16, 2018**. The citation number shall be written on the check. The check shall be made payable to the California Division of Drinking Water Safe Drinking Water Account and submitted to:

SWRCB Accounting Office
Attn: Drinking Water Program
PO Box 1888
Sacramento, CA 95812-1888

Please attach check below:

COMPLIANCE CERTIFICATION

Citation Number: **21-18C-020**

Name of Water System: **Terhel Farms Trailer Park 01**

System Number: **0600027**

As required by Section 116450 of the California Health and Safety Code, I certify that the Terhel Farms Trailer Park 01 complied with the fine directive of this citation as indicated below:

<u>Required Action</u>	<u>Date Completed</u>
Payment of \$500.00 Administrative Penalty to the Division of Drinking Water in Sacramento, as required by Directive 1	_____
_____	_____
Signature of Water System Representative	Date

Attach a copy of the check for payment of the administrative penalty.

**THIS FORM MUST BE COMPLETED AND RETURNED TO THE DIVISION
NO LATER THAN AUGUST 16, 2018**

Disclosure: Be advised that Section 116725 and 116730 of the California Health and Safety Code states that any person who knowingly makes any false statement on any report or document submitted for the purpose of compliance with the attached order may be liable for a civil penalty not to exceed five thousand dollars (\$5,000) for each separate violation for each day that violation continues. In addition, the violators may be prosecuted in criminal court and upon conviction, be punished by a fine of not more than \$25,000 for each day of violation, or be imprisoned in county jail not to exceed one year, or by both the fine and imprisonment.

② <https://drinc.ca.gov/ear/2017SWSHelp.htm>

**SMALL WATER SYSTEM
2016 ANNUAL REPORT TO THE DRINKING WATER PROGRAM
FOR YEAR ENDING DECEMBER 31, 2016
[Section 116530 Health & Safety Code]**

WATER SYSTEM INFORMATION	
Water System No.:	
Water System Name:	
Water System Classification: ?	
Water System Ownership (See descriptions below):	--Pick one-- ▾
Physical location: (address line 1, address line 2, city, zip)	
General Office Phone: ② (with area code)	
Web site address:	

Water System Ownership Descriptions:

- Local Government: e.g., city, county, or special district, local school district, junior colleges, county or community parks, etc.
- State or Federal Government: e.g., state or national park, BLM, USFS and COE campgrounds and recreation facilities, state hospitals, State universities and colleges, California Veterans Home, County or District Fairs and Expositions, Caltrans rest stop, military base, other state or federal facility
- Privately owned, non-PUC-regulated (Community Water System): e.g., mobile home park, apartment or condominium
- Privately owned business (non-community): e.g., church, private school, restaurant, amusement park, RV park/campground, motel, ranch/farm, factory, other business establishment

REPORT SUBMITTED BY: ②	
Note: Your name and title, email address, and work phone number are disclosable report information that may be obtained through the Public Records Act.	
Name:	
Title:	
Work phone:	
Cell phone:	
Email address:	

COMMENTS: ②

1. Public Water System Contacts ②

[Click here](#) to learn how to Modify, Add and Delete Contacts in the table below.

IMPORTANT: Each water system must have one and only one Administrative Contact AND one and only one Financial Contact. The same person may be both the Administrative and Financial Contacts.

Please provide an email address for the Administrative Contact as most email communication, particularly email blasts, from the Division of Drinking Water will be sent to the email address of the Administrative Contact.



PHONE TYPE: Home – if you use your home or personal phone number as your business number, use the HOME phone type instead and leave the BUSINESS phone type blank.
Only the BUSINESS phone type will appear in Drinking Water Watch (<https://sdwis.waterboards.ca.gov/PDWW/>), which can be viewed by the public, if the General Office phone number is not provided (see Water System Information section under the Intro tab).

NAME, TITLE & ADDRESS	PHONE TYPE	PHONE NO.	EMAIL	CONTACT TYPE (pick all that apply)②	
	Business			<input type="checkbox"/> ** Delete Contact **	<input type="checkbox"/> Operator
	Home			<input type="checkbox"/> Administrative	<input type="checkbox"/> Emergency
	Facsimile			<input type="checkbox"/> Financial	<input type="checkbox"/> Water Quality
	Mobile			<input type="checkbox"/> Designated Operator In Charge	<input type="checkbox"/> Legal
	Emergency			<input type="checkbox"/> Owner	<input type="checkbox"/> Contract Operator
				<input type="checkbox"/> Funding	
	Business			<input type="checkbox"/> ** Delete Contact **	<input type="checkbox"/> Operator
	Home			<input type="checkbox"/> Administrative	<input type="checkbox"/> Emergency
	Facsimile			<input type="checkbox"/> Financial	<input type="checkbox"/> Water Quality
	Mobile			<input type="checkbox"/> Designated Operator In Charge	<input type="checkbox"/> Legal
	Emergency			<input type="checkbox"/> Owner	<input type="checkbox"/> Contract Operator
				<input type="checkbox"/> Funding	
	Business			<input type="checkbox"/> ** Delete Contact **	<input type="checkbox"/> Operator
	Home			<input type="checkbox"/> Administrative	<input type="checkbox"/> Emergency
	Facsimile			<input type="checkbox"/> Financial	<input type="checkbox"/> Water Quality
	Mobile			<input type="checkbox"/> Designated Operator In Charge	<input type="checkbox"/> Legal
	Emergency			<input type="checkbox"/> Owner	<input type="checkbox"/> Contract Operator
				<input type="checkbox"/> Funding	
	Business			<input type="checkbox"/> ** Delete Contact **	<input type="checkbox"/> Operator
	Home			<input type="checkbox"/> Administrative	<input type="checkbox"/> Emergency
	Facsimile			<input type="checkbox"/> Financial	<input type="checkbox"/> Water Quality
	Mobile			<input type="checkbox"/> Designated Operator In Charge	<input type="checkbox"/> Legal
	Emergency			<input type="checkbox"/> Owner	<input type="checkbox"/> Contract Operator
				<input type="checkbox"/> Funding	
	Business			<input type="checkbox"/> ** Delete Contact **	<input type="checkbox"/> Operator
	Home			<input type="checkbox"/> Administrative	<input type="checkbox"/> Emergency
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	Mobile			<input type="checkbox"/> Designated Operator In Charge	<input type="checkbox"/> Legal
	Emergency			<input type="checkbox"/> Owner	<input type="checkbox"/> Contract Operator
				<input type="checkbox"/> Funding	
	Business			<input type="checkbox"/> ** Delete Contact **	<input type="checkbox"/> Operator
	Home			<input type="checkbox"/> Administrative	<input type="checkbox"/> Emergency
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	Mobile			<input type="checkbox"/> Designated Operator In Charge	<input type="checkbox"/> Legal
	Emergency			<input type="checkbox"/> Owner	<input type="checkbox"/> Contract Operator
				<input type="checkbox"/> Funding	

	Facsimile			<input type="checkbox"/> Financial	<input type="checkbox"/> Emergency
	Mobile			<input type="checkbox"/> Designated Operator In Charge	<input type="checkbox"/> Water Quality
	Emergency			<input type="checkbox"/> Owner	<input type="checkbox"/> Legal
				<input type="checkbox"/> Funding	<input type="checkbox"/> Contract Operator
	Business			<input type="checkbox"/> ** Delete Contact **	<input type="checkbox"/> Operator
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	Emergency			<input type="checkbox"/> Owner	<input type="checkbox"/> Contract Operator
				<input type="checkbox"/> Funding	
	Business			<input type="checkbox"/> ** Delete Contact **	<input type="checkbox"/> Operator
	Home			<input type="checkbox"/> Administrative	<input type="checkbox"/> Emergency
	Facsimile			<input type="checkbox"/> Financial	<input type="checkbox"/> Water Quality
	Mobile			<input type="checkbox"/> Designated Operator In Charge	<input type="checkbox"/> Legal
	Emergency			<input type="checkbox"/> Owner	<input type="checkbox"/> Contract Operator
				<input type="checkbox"/> Funding	
Add Additional Contact?			(pick all that apply)		
	Business			<input type="checkbox"/> Administrative	<input type="checkbox"/> Operator
	Home			<input type="checkbox"/> Financial	<input type="checkbox"/> Emergency
	Facsimile			<input type="checkbox"/> Designated Operator In Charge	<input type="checkbox"/> Water Quality
	Mobile			<input type="checkbox"/> Owner	<input type="checkbox"/> Legal
	Emergency			<input type="checkbox"/> Funding	<input type="checkbox"/> Contract Operator
Add Additional Contact?			(pick all that apply)		
	Business			<input type="checkbox"/> Administrative	<input type="checkbox"/> Operator
	Home			<input type="checkbox"/> Financial	<input type="checkbox"/> Emergency
	Facsimile			<input type="checkbox"/> Designated Operator In Charge	<input type="checkbox"/> Water Quality
	Mobile			<input type="checkbox"/> Owner	<input type="checkbox"/> Legal
	Emergency			<input type="checkbox"/> Funding	<input type="checkbox"/> Contract Operator
Add Additional Contact?			(pick all that apply)		
	Business			<input type="checkbox"/> Administrative	<input type="checkbox"/> Operator
	Home			<input type="checkbox"/> Financial	<input type="checkbox"/> Emergency
	Facsimile			<input type="checkbox"/> Designated Operator In Charge	<input type="checkbox"/> Water Quality
	Mobile			<input type="checkbox"/> Owner	<input type="checkbox"/> Legal
	Emergency			<input type="checkbox"/> Funding	<input type="checkbox"/> Contract Operator
Add Additional Contact?			(pick all that apply)		
	Business			<input type="checkbox"/> Administrative	<input type="checkbox"/> Operator
	Home			<input type="checkbox"/> Financial	<input type="checkbox"/> Emergency
	Facsimile			<input type="checkbox"/> Designated Operator In Charge	<input type="checkbox"/> Water Quality
	Mobile			<input type="checkbox"/> Owner	<input type="checkbox"/> Legal
	Emergency			<input type="checkbox"/> Funding	<input type="checkbox"/> Contract Operator

Emergency		<input type="checkbox"/> Owner	<input type="checkbox"/> Legal
		<input type="checkbox"/> Funding	<input type="checkbox"/> Contract Operator
COMMENTS:②			

2. POPULATION SERVED

Population Type	Population ②	Annual Operating Period ②			
		Begin Date		End Date	
		MM	DD	MM	DD
Residential ¹		Method Used to Determine Population: --Pick one-- <input checked="" type="checkbox"/>			
Transient ²					
Nontransient ³					

MM = month, in 2-digit format DD = day, in 2-digit format

Descriptions:

¹Residential ② – report the number of persons who reside within the water system service area for more than half of the year (excludes transient and nontransient populations). If year-round, the *Begin Date* would be 01/01 and the *End Date* would be 12/31.

²Transient ② – report the number of persons who are at the water system on the 60th busiest day of the year (excludes residential and nontransient populations). Report the *Begin Date* and *End Date* if the Transient use is seasonal.

³Nontransient ② – report the number of the persons who are at the water system for over 6 months per year (excludes residential and transient populations). Report the *Begin Date* and *End Date* if the Nontransient use is seasonal.

List the names of communities served by the system identifying both incorporated and unincorporated areas:
COMMENTS:②

3. NUMBER OF SERVICE CONNECTIONS(as of December 31, 2016)

A. Active Service Connections:

Total Active Potable Water Connections currently in Division of Drinking Water database:	
--	--

The total number of Service Connections as of December 31, 2016 must be reported as either Unmetered or Metered for each Service Connection Type as appropriate.

	Potable Water			Recycled Water		
TYPE	Unmetered	Metered	Total*	Unmetered	Metered	Total*
Do NOT report fire sprinkler connections and fire hydrants. These connections are not counted toward "service connections" for compliance purposes.						
<u>Single-family Residential:</u> single family detached dwellings						

<u>Multi-family Residential:</u> Apartments, condominiums, town houses, duplexes and trailer parks						
<u>Commercial/Institutional:</u> Retail establishments, office buildings, laundries, schools, prisons, hospitals, dormitories, nursing homes, hotels						
<u>Industrial:</u> All manufacturing						
<u>Landscape Irrigation:</u> Parks, play fields, cemeteries, median strips, golf courses						
<u>Agricultural Irrigation:</u> Irrigation of commercially-grown crops						
Total Active Connections*						

*Calculated field

To update totals click here



	Potable Water			Recycled Water		
TYPE	Unmetered	Metered	Total*	Unmetered	Metered	Total*
<u>Other:</u> Fire suppression, street cleaning, line flushing, construction meters, temporary meters						

B. Number of Inactive Connections (all types)

Include only service connections that have been physically disconnected (i.e., meter removed) from the water system. All other service connections should be considered as "Active."

COMMENTS:?

4. GROUNDWATER (GW) AND SURFACE WATER (SW) SOURCES?

GROUNDWATER SOURCES (INCLUDING STANDBY SOURCES)

PSCode ?	Name	Activity ?

Add sources not listed above. Describe changes to sources above under "Comments".

PSCode ?	Name	Activity ?	Comments

SURFACE WATER INTAKES

PSCode ⓘ	Name	Activity ⓘ

Add sources not listed above. Describe changes to sources above under "Comments".

PSCode ⓘ	Name	Activity ⓘ	Comments

Are your water sources metered? ☒

DISCUSS CHANGES TO ABOVE SOURCES ⓘ

If a STANDBY SOURCE was used in 2016, provide the following information.

Name of the Standby Source used in 2016:	No. of days the Standby Source was in operation:	Were customers notified? (Y/N)	Was DDW or Local County Staff notified? (Y/N)	Describe the reason the Standby Source was used:

COMMENTS: ⓘ

5. WATER PRODUCED, PURCHASED AND SOLD

The **Maximum Day** is the day during 2016 with the highest total water usage. Provide the *date* for that day in Column B, then complete Columns C, D and E, indicating how much of the water on that day was from each source.

Units of Measure for this table:

Volumes are based on:

A	B	C	D	E	F	G	H	I
	Potable Water						Non-potable (exclude recycled)	Recycled
	Date/ Month	Water Produced from Groundwater (Wells)	Water Produced from Surface Water ²	Finished Water Purchased or Received from another PWS ⁵	Total Amount of Potable Water ^{3*}	Water Sold to Another PWS ⁵		
Maximum Day ¹								
January								
February								
March								
April								
May								
June								
July								
August								
September								
October								
November								
December								
Annual Total*								
Percent Treated ⁴								

PWS = Public Water System

*Calculated field. If you do not have monthly production data to report, please report your Annual Total production in the row for January and enter "0" for all the other months.

Non-potable = water supplies that do not enter the drinking water distribution system and are for non-potable uses only such as irrigation or toilet flushing

¹Only report Maximum Day if it is actually measured or determined from production records. It should not be the average day demand during the maximum month of production.

²Do not include raw water purchased; report only volume of water that was treated.

³(F) Total Amount of Potable Water = Sum of Columns (C), (D) and (E), automatically calculated. To update, click below

[To update totals click here](#)

⁴This is the percentage of the total annual volume for Groundwater produced that was provided treatment to meet drinking water standards other than precautionary disinfection and fluoridation.

⁵If water was Purchased from or Sold to another PWS, complete the table below:

Specify whether water was Purchased or Sold	Name of PWS

If recycled water was *supplied to your customers*, complete the table below:

Specify the level of treatment (e.g., tertiary, disinfected secondary)	Name of Recycled Water supplier

COMMENTS: ②

6a. WATER RATES

If you have questions about completing this section of the report, please contact Kathy.Frevert@Waterboards.ca.gov or call (916) 322-5274.



Indicate the type of residential water rate structure ② used by your water system: --Pick one--

If tiered, what is the number of tiers?	--Pick one--
Date of most recent update to the rate structure: MM/DD/YYYY	
Describe the changes that were made in the update:	
What is your billing frequency --Pick one--	
What is your new connection fee?	
Date of most recent update to the new connection fee: MM/DD/YYYY	

Complete the table below providing specific water rates applied to your customers:

Connection Type	FLAT BASE RATE (FBR)	If FBR + UUR, what is the volume allowed before UUR applies	UNIFORM USAGE RATE (UUR)	VARIABLE BASE RATE (provide range) (VBR)		VARIABLE USAGE RATE (provide range) (VUR)	
	\$ (Base)	HCF ②	\$ per HCF	\$ Low	\$ High	\$ per HCF Low	\$ per HCF High
RESIDENTIAL ②							
Single-family Residential							
Multi-family Residential							
Do you provide lifeline/low income subsidies?				--Pick one--			
If Yes, provide rates:							
If yes, what percentage of residential customers receives this subsidy? (Example: X %)				%			
NON-RESIDENTIAL ②							
Commercial/Institutional							
Industrial							
Landscape Irrigation							
Agricultural Irrigation							

Other							
Do you have fire suppression surcharges?	--Pick one-- ▼						
If Yes, provide rates:							
Do you have other surcharges?	--Pick one-- ▼						
What are the other surcharges?							
If Yes, provide rates:							



For each of the three water volumes shown below, provide what would be the monthly water bill for a single-family residential customer. Include all fees and service charges associated with water services that this customer would pay when their household used the specified amount of water.

Amount of water delivered to customer: Bill amount (including all charges/fees associated with the amount of water used):



- | | |
|-----------|---------------|
| a. 6 HCF | Dollars/month |
| b. 12 HCF | Dollars/month |
| c. 24 HCF | Dollars/month |

NOTE: If this is not a "Community" Water System or if individual customers do not pay a separate bill for water enter "0". If bill amount would vary by season, use the month or time period with the highest water consumption.

HCF means "hundred cubic feet". There are 748 gallons in 100 cubic feet.

6b. WATER DELIVERIES

Units of Measure for this table: --Pick one-- ▼

Provide monthly **metered** water deliveries in the table below.

A	B	C	D	E	F	G	H	I	J
	Single-family Residential	Multi-family Residential	Commercial/Institutional	Industrial	Landscape Irrigation	Other	Total Urban Retail ^{1*}	Agricultural	Other PWS
Check if Recycled Water is included:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
January									
February									
March									
April									
May									
June									
July									
August									
September									
October									
November									
December									
Total*									

PWS = Public Water System

*Calculated field

¹Total Urban Retail = Sum of Columns (B) thru (G), automatically calculated. To update, click below

To update totals click here

COMMENTS:?

7. WATER QUALITY**ANNUAL NITRATE SAMPLING**

Regulations require a minimum of **annual** sampling for nitrate. If any nitrate result is $\geq 1/2$ the MCL (Maximum Contaminant Level) of 10 mg/l as nitrogen (i.e., a result of ≥ 5 mg/l as nitrogen) then quarterly monitoring must be initiated.

Did your system conduct monitoring for nitrate during 2016 from each source?	--Pick one--
--	--------------

NOTE: If there were any sources that were not monitored because they were offline during 2016, you must contact your local regulatory agency to avoid an enforcement action for failure to monitor.

BACTERIOLOGICAL SAMPLE SITING PLAN

The coliform monitoring regulations require that an updated sample-siting plan be submitted at least every 10 years, and at any time the plan no longer ensures representative monitoring of the system (Section 64422 of Title 22).

Date of current bacteriological sample siting plan:	
---	--

COMMENTS:?

8. WATER TREATMENT

Treatment Plant	Required Treatment Plant Operator Classification

If treatment was added or changed in any way in 2016, provide a brief description and identify the water source

TD = Treatment or Distribution operator at any level

NR, N/A, NA = There are no facilities subject to the Certified Treatment Plant Operator requirements

DIRECT ADDITIVES

Are all chemicals used NSF/ANSI Standard 60 certified? ?	--Pick one--
--	--------------

INDIRECT ADDITIVES

As of March 9, 2008, a water system shall not use any chemical, material, lubricant, or product in the production, treatment or distribution of drinking water that comes in contact with the drinking water that does not have certification of meeting NSF/ANSI standard 61.

Does your water system have procedures to ensure all future equipment and materials meet this standard?	--Pick one-- ▾
---	----------------

If you have any questions on the requirements related to indirect additives, you may contact your local regulatory agency.

COMMENTS:②

9. CROSS-CONNECTION CONTROL ②

	Total Number in System	Number Installed in 2016	Number Tested in 2016	Number Failed in 2016	Number Repaired/ Replaced
Backflow Assemblies ② on the Service Connections or Meter (Reduced Pressure Principle and Double Check Valve assemblies)					
Backflow Assemblies On-site but not on the Service Connections or Meter ② (Reduced Pressure Principle and Double Check Valve assemblies)					
Air-gap Separation ②					

No. of Inactive Backflow Prevention Assemblies ② in water system in 2016 :		
Date of last cross-connection control survey done on the system:		
Cross Connection Control Program Coordinator		
Name:		
Certification Number:		
Business Phone:		Email Address:
Certification or training received:		

Describe any cross-connection incidents ② that occurred during 2016:

COMMENTS:②

10. CONSUMER CONFIDENCE REPORT ② (does not apply to Transient Noncommunity water systems)

THE 2016 CCR MUST BE DISTRIBUTED TO YOUR CUSTOMERS AND A COPY SUBMITTED TO YOUR LOCAL REGULATORY AGENCY BY JULY 1, 2017. IN ADDITION, PUBLIC WATER SYSTEMS THAT ARE ALSO REGULATED BY THE CALIFORNIA PUBLIC UTILITIES COMMISSION (PUC) MUST MAIL A COPY OF THEIR CCR TO THE PUC BY JULY 1, 2017.

CERTIFICATION MUST BE SUBMITTED TO YOUR LOCAL REGULATORY AGENCY BY OCTOBER 1, 2017, STATING THAT THE 2016 CCR HAS BEEN DISTRIBUTED TO CUSTOMERS AND THAT THE INFORMATION IS CORRECT.

The CCR guidance, CCR template, and the certification form can be obtained from the Division of Drinking Water web site at: http://www.waterboards.ca.gov/drinking_water/certific/drinkingwater/CCR.shtml

Indicate the date your 2016 CCR was distributed or will be distributed to your customers:

mm/dd/yyyy

COMMENTS:②

11. OPERATOR CERTIFICATION

A. Please list the State certified Water **Treatment Plant Operators** employed by your water system that supervise and direct the operation of your water treatment plants, beginning with the chief operator(s) ②.

Your Highest Treatment System Classification is:

If you do not have a Certified Distribution System Operator, put "NONE" in each column of the first row.

Treatment Operator Name (First name Last name)	Grade of Treatment Operator (1, 2, 3, 4, or 5)	Chief or Shift ¹ (C, S or X)	Treatment Operator Number (4 or 5 digits)	Treatment Certification Expiration Date (MM/DD/YYYY)

¹Use "C" for Chief Operator and "S" for Shift Operator. If neither, put an "X". Do not leave blank.

Do your Chief and Shift Treatment Plant Operators have the minimum level required? --Pick one--



B. Please list the State certified Water **Distribution System Operators** employed by your water system that supervise and direct the operation of your distribution systems, beginning with the chief operator(s) ②.

Your Distribution System Classification is:

If you do not have a Certified Distribution System Operator, put "NONE" in each column of the first row.

Distribution Operator Name (First name Last name)	Grade of Distribution Operator (1, 2, 3, 4, or 5)	Chief or Shift ¹ (C, S or X)	Distribution Operator Number (4 or 5 digits)	Distribution Certification Expiration Date (MM/DD/YYYY)

¹Use "C" for Chief Operator and "S" for Shift Operator. If neither, put an "X". Do not leave blank.

Do your Chief and Shift Distribution System Operators have the minimum level required? --Pick one--



COMMENTS:②

12. WATER SYSTEM IMPROVEMENTS

The California Waterworks Standards (Section 64556) require an amended permit for any of the following improvements or modifications:

- Addition of a new distribution reservoir with a capacity of 100,000 gallons or more
- Modification or extension of the existing distribution system using an alternative to the requirements of the California Waterworks Standards (see Sections 64570 through 64578)
- Modification of the water supply by:
 - Adding a new source
 - Changing the status of an existing source (for example, active to standby) or
 - Changing or altering a source, such that the quality or quantity of water supply could be affected
- Any addition or change in treatment, including
 - Design capacity

- Process
- Expansion of the existing service area by 20 percent or more of the number of service connections specified in your current permit.

If your water system made any improvements or modifications during 2016 for which a permit was not obtained, please describe the improvements or modifications below.

Indicate any planned improvements or modifications for 2017.

COMMENTS:?

13. COMPLAINTS REPORTED (WRITTEN OR VERBAL)

Type of Complaint	No. of Complaints Reported by Customers	No. of Complaints Investigated	No. of Complaints reported to the Division of Drinking Water or Local County Staff	Brief Description of Cause and Corrective Action taken
Taste and Odor				
Color				
Turbidity				
Visible Organisms				
Pressure (High or Low)				
Water Outages				
Illnesses (Waterborne)				
Other (Specify)				
Total No. of Complaints*				

*Calculated field

To update totals click here

COMMENTS:?

14. SYSTEM PROBLEMS

Type of Problem	No. of Problems	No. of Problems Investigated	No. of Problems Reported to the Division of Drinking Water or Local County Staff	Brief Description of Cause and Corrective Action Taken
Service Connection Breaks/ Leaks				
Main Breaks/Leaks				

Water Outages?				
Boil Water Orders				
Total*				
To update totals click here				

COMMENTS:

15. ONGOING WATER SYSTEM VIOLATIONS

Is your water system operating under USEPA, Division or LPA enforcement for a continuous violation?	--Pick one-- ▼
---	----------------

If yes, respond to the following:

Type of violation (for example, specify "Nitrate MCL" violation if your wells exceeds the nitrate MCL of 45 mg/L	
Dates in 2016 that public notification was provided to users	
Corrective action taken in 2016	
Was bottled water provided to users?	--Pick one-- ▼
If yes, how was bottled water provided, for example, direct delivery?	
Describe anticipated schedule to return to compliance	

COMMENTS:

16. WATER CONSERVATION AND DROUGHT PREPAREDNESS

Date of your revised Drought Preparedness Plan, if any:	
If you experienced water shortages in 2016, please estimate the amount of shortfall in millions of gallons:	
Did drought conditions cause you to activate emergency standby wells in 2016?	--Pick one-- ▼
Do you project water shortages in the current calendar year?	--Pick one-- ▼
Did you implement NEW water conservation measures in 2016?	--Pick one-- ▼
If you implemented NEW water conservation measures in 2016, please estimate how much water was conserved in millions of gallons:	

(MG) % reduction in demand	
Do you anticipate having to go to mandatory rationing in the upcoming year?	--Pick one-- ▼
Do you routinely monitor the <i>static</i> water levels in your wells?	--Pick one-- ▼
Do you routinely monitor the <i>pumping</i> water levels in your wells?	--Pick one-- ▼
Are these levels recovering, declining or steady?:	--Pick one-- ▼

Please list any other long term actions you are considering or planning:

COMMENTS: ⓘ

Disclosure: Be advised that Sections 116725 and 116730 of the California Health and Safety Code states that any person who knowingly makes any false statement on any report or document submitted for the purposes of compliance may be liable for a civil penalty not to exceed five thousand dollars (\$5,000) for each separate violation for each day that the violation continues. In addition, the violators may be prosecuted in criminal court and upon conviction, be punished by a fine of not more than \$25,000 for each day of the violation, or be imprisoned in county jail not to exceed one year, or both the fine and imprisonment.

IMPORTANT INFORMATION ABOUT YOUR DRINKING WATER

Este informe contiene información muy importante sobre su agua potable.
Tradúzcalo o hable con alguien que lo entienda bien.

**TERHEL FARMS TRAILER PARK RECEIVED A CITATION FOR NOT
SUBMITTING TO THE STATE WATER RESOURCES CONTROL
BOARD THE 2016 AND 2017 ANNUAL REPORTS, AND FOR NOT
CORRECTING WATER SYSTEM DEFICIENCIES FOUND DURING THE
2017 WATER SYSTEM INSPECTION.**

Our water system violated several drinking water statutes and regulations over the past two years. Although this is not an emergency, as our customers, you have a right to know what you should do, what happened, and what we are doing to correct this situation.

What should you do?

You do not need to boil the water or take any corrective actions. This is not an emergency.

What happened? What was done?

Per the California Health and Safety Code, the State Water Resources Control Board (hereinafter, 'State Water Board') requires all public water systems to submit an annual report of water system contact information as well as technical information. Over the past two years we have failed to submit the 2016 and 2017 annual reports to the State Water Board.

Furthermore, during a water system inspection performed by the State Water Board on September 6, 2017, several water system deficiencies were found and were to be corrected by October 15, 2017. The following deficiencies were not corrected by the specified due date:

1. The Emergency Notification Plan needs to be updated and a copy submitted to the Division of Drinking Water.
2. The Bacteriological Sample Siting Plan (BSSP) needs to be updated and a copy submitted to the Division.
3. The electronic Annual Report needs to be completed on-line.
4. The well head top seal needs to have a gooseneck shaped casing vent installed that is downward turned and screened.
5. The electrical tape wrapping around the well casing needs to be removed and photos showing 360 degrees around the well head need to be submitted to the Division for evaluation. A review of previous inspection photographs reveal that the well casing may be rusted through

What is being done?

By July 1, 2018, we are to submit to the State Water Board the 2016 and 2017 Annual Reports as well as correct all deficiencies identified above.

For more information, please contact Cindy Holland at (530) 476-3000.

State Water System ID#: 0600027

Date distributed: _____.

CERTIFICATION OF COMPLETION OF PUBLIC NOTIFICATION

This form when completed and returned to the Division of Drinking Water (364 Knollcrest Drive, Suite 101, Redding, CA 96002 or fax to 530-224-4844), serves as certification that public notification to water users was completed as required by the State Water Resources Control Board. Completing public notification and providing the Division with certification is important. Failure to do so will result in additional hourly time charges to your water utility and may result in a formal enforcement action with monetary penalties.

Public Water System Name Terhel Farms Trailer Park 01

Public Water System No. 0600027

Public notification for the annual report and water system deficiencies citation in June 2018 was performed by the following method(s):

Check and Complete

- a) ☐ Posting in conspicuous places throughout the water system.

I hereby certify that the above information is factual.

Printed Name

Signature

Date